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CONFIRMATION NO. 7451

<b>SERIAL NUMBER</b> 10/650,585	<b>FILING OR 371(c) DATE</b> 08/28/2003 <b>RULE</b>	<b>CLASS</b> 530	<b>GROUP ART UNIT</b> 1648	<b>ATTORNEY DOCKET NO.</b> 13/082-1-D1	
<b>APPLICANTS</b> Daniel Lamarre, Laval, CANADA; Louise Pilote, Laval, CANADA; <i>Baugen L</i>					
<b>** CONTINUING DATA *****</b> This application is a DIV of 10/017,736 12/14/2001 PAT 6,815,159 which claims benefit of 60/256,031 12/15/2000 <i>Baugen L</i>					
<b>** FOREIGN APPLICATIONS *****</b> <i>Baugen L</i>					
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 01/09/2004</b>					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and <i>Baugen L</i> Acknowledged <i>BL</i> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> CANADA	<b>SHEETS DRAWING</b> 12	<b>TOTAL CLAIMS</b> 5	<b>INDEPENDENT CLAIMS</b> 4
<b>ADDRESS</b> 28518					
<b>TITLE</b> PURIFIED ACTIVE HCV NS2/3 PROTEASE					
<b>FILING FEE RECEIVED</b> 918	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		